

Classification

Approved For Release 2006/09/25 : CIA-RDP75-00399R000100120127-4

REPORTS INVENTORY

PREPARE IN DUPLICATE

XXXXXXXXX DDS/OL/SD-69

1. TITLE OF REPORT (If a fill-in report include Form No.)

Property On-Loan to Others Status Report

2. TYPE  
OF  
REPORT

<input checked="" type="checkbox"/>	STATISTICAL
<input type="checkbox"/>	NARRATIVE
<input type="checkbox"/>	MACHINE-NAME LISTING

3. FUNCTIONAL AREA

<input type="checkbox"/>	PERSONNEL	<input type="checkbox"/>	TRAINING
<input checked="" type="checkbox"/>	LOGISTICS	<input type="checkbox"/>	SECURITY
<input type="checkbox"/>	MEDICAL	<input type="checkbox"/>	FINANCE

ADMIN. GENERAL  
OTHER (specify)

4. NO. OF COPIES PREPARED

1

5. FREQUENCY (weekly, monthly, quarterly, etc.)

Monthly

6. DISTRIBUTION (No. of components not  
number of copies)

1

7. FORMAT (memorandum, form  
computer print-out, etc)

Computer Print-Out

8. ADP PROCESSING

<input checked="" type="checkbox"/>	YES	IF YES GIVE ADP PROCESSING NO.
<input type="checkbox"/>	NO	202

9. DIRECTIVE AUTHORITY REQUIRING REPORT

HR

STAT

10. PREPARING COMPONENT (include lowest level  
contributing information to report)

OCS, OL/SD/FSB

11. FEEDER REPORTS (State total number and identify by Title,  
Form No., or nomenclature. Attach separate sheet if necessary.)

## 12. COST FACTORS

## A. MANUAL PREPARATION AND REVIEW COSTS

GRADE	HOURLY RATE	<input checked="" type="checkbox"/> HOURS PER REPORT	= COST PER REPORT	<input checked="" type="checkbox"/> TIMES PREPARED	= COST PER YEAR
GS-13	8.06	.5	4.03	12	48.36

## B. COSTS OF COMPUTER PRODUCED REPORTS

			.15	12	1.80
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TOTAL COSTS PER YEAR

50.16

13. COMPLETE DETAILED JUSTIFICATION FOR THIS REPORT (in addition to directive or authority cited in item 9). IF KNOWN,  
INCLUDE DATE REPORT WAS FIRST STARTED AND COMPONENT WHO ESTABLISHED REQUIREMENT.

A consolidated record of Agency property on loan to other government agencies. Required for follow-up purposes to ensure return of the property.

## 14. FUTURE GOALS

GOAL PROPOSED BY COMPONENT FOR THIS REPORT

<input checked="" type="checkbox"/>	RETAIN AS IS	<input type="checkbox"/>	OTHER (explain)
<input type="checkbox"/>	CHANGE		
<input type="checkbox"/>	DISCONTINUE		

ESTIMATED SAVINGS

MAN-HOURS

DOLLARS

STAT

16. DATE OF INVENTORY

25 Sept 70

17. NAME AND TITLE OF PERSON FURNISHING INFORMATION

18. EXTENSION

FORM  
9-70

142

Classification

(22-26-12)